

WESTERN SYDNEY
UNIVERSITY



Vice-Chancellor's GENDER EQUALITY FUND Final Report 2023

Report Title:

*Building Safer Communities:
Recognise, Respond and Refer*

Author/s: *Emma Taylor, Steve Lee, and Ingrid
Dernée*

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Recommendations

Building Safer Communities: Recognise, Respond and Refer, key recommendations aim to ensure ongoing safety, support, and sustainability of outcomes.

Recommendations are based on three guiding questions,

1. How do we keep our community, both students and staff safe?
2. How do we foster connection and belonging?
3. How do we support our community, both students and staff?

The two key recommendations are:

1. *Building Safer Communities: Recognise, Respond and Refer* campaign is integrated into a yearly cadence.
2. A Coordinated Approach to Wellbeing at Campus Living Villages.

Details of how recommendations could be implemented:

1. *Building Safer Communities: Recognise, Respond and Refer* campaign is integrated into a yearly cadence.

Annual implementation of Building Safer Communities: Recognise, Respond and Refer campaign across Western Sydney University (Western) campuses and at Campus Living Villages (CLVs). This will include:

- Annual Building Safer Communities Week – championing a culture of respect and safety, and gender equity, and providing resources and support pathways for the prevention of violence, and the promotion of wellbeing and safety. Suggested collaborative partners include Respectful Relationships, Equity and Diversity, Work Health Safety and Wellbeing (WHS&W), Mental Health and Wellbeing Team (MHWBT), Wellbeing Services, Western Success, Student Partners, and Campus Living Villages.
- Distribution of [Recognise, Respond and Refer Resources](#) across Western and CLVs, providing Residential Assistants (RAs) and CLV Residents clear support and referral options, linking to both University and external supports. Resources link to existing We Support You, [Support](#) and [Report](#) portals and [Respectful Relationships](#) resources identifying support to priority populations.

- Bi-annual Building Safer Communities: Recognise, Respond and Refer workshops for RAs on recognising, and responding to student needs, and how to provide support and referral pathways.
- Annual Building Safer Communities: Recognise Respond Refer workshops for all CLV Residents delivered by CLV staff in partnership with key Western Supports (MHWBT, Equity and Diversity, and Wellbeing Services).

2. A Coordinated Approach to Wellbeing at Campus Living Villages.

- a. Dedicated Wellbeing Coordinator – Employment of a Wellbeing Coordinator with appropriate clinical qualifications (Social Work, Counselling, Psychology), located in CLVs to support student wellbeing in residential accommodation, and sitting in the MHWBT. (Alternatively, a designated RA or Manager given appropriate training and support could be allocated to this role). The Wellbeing Coordinator would support students and staff at CLVs by aligning with the Western Sydney University [Wellbeing and Mental Health Strategy 2022-2026](#), through
 - **Promotion** – coordinating student wellbeing initiatives that are needs-based and person-centred across CLVs such as Wellbeing Cafes, and/or linking to existing wellbeing activities at Western.
 - **Prevention** – coordinating training to improve mental health literacy, strengthen knowledge of respectful relationships and promote wellbeing and safety.
 - **Early Intervention** – support staff to support students. This includes regular supervision with CLV staff regarding complex student presentations and support options, including referrals to Western and external community supports (Wellbeing Services, Headspace, etc.). Early identification of at-risk students, noticing changes in student behaviour, appearance, etc.
 - **Systemic Response** – CLV staff (Managers and Residential Assistants) access prevention and promotion strategies co-designed and facilitated with the MHWBT, working systemically to ensure a coordinated, response to support students and staff at CLVs. Examples include attending

fortnightly MHWBT meetings to connect with university initiatives and supports. Utilising existing services and skills within our Western Sydney University system ensures a more sustainable approach to wellbeing, supporting students and staff at CLVs.

b. Residential Assistant Support

Workshop outcomes from Part 1 of the Building Safer Communities campaign identified a clear need to support Residential Assistants, including,

- Reviewing RA position descriptions outlining role, boundaries, responsibilities, and reporting line. Option to include MHWBT in the recruitment process.
- A coordinated package of training and support for RAs embedded into processes and yearly cadence, ensuring mental health and wellbeing literacy, boundaries, and recognising and responding to student needs and pathways for referral.

c. Review of application/onboarding processes for Residents at CLVs

- Ensuring application processes are aligned with Western policies, procedures and codes of conduct, and that applications allow for needs analysis of student cohort, including identifying support and belonging requirements.
- Compulsory orientation workshops on respectful behaviour, mental health and wellbeing literacy, support services and referral pathways.

d. Strengthening the System

Linking to existing support networks, resources, and systems at Western Sydney University and to relevant external community supports. This may include Training opportunities (Psychological First Aid, Sticky Stuff Sexual Health Training, Ally Training), Bespoke Workshops, Wellbeing Engagement (Wellbeing Cafes, Rainbow Pride Sessions, Cultural Wellbeing Groups, International Student Meet Ups), Support Services (Counselling, Disability and Welfare) and Campaigns and Resources (We Support You and Respectful Relationships). Collaborative partners include MHWBT, Equity and

Diversity, Respectful Relationships, WHS&W, Wellbeing Services, and NSW Health.

Executive Summary

Building Safer Communities: Recognise, Respond and Refer, arose from needs identified in the National Student Safety Survey 2021, outlining high levels of sexual harassment and assault occurring at universities, with a significant number of high-impact incidents occurring in residential accommodation (Heywood et al., 2022). Ongoing issues at Campus Living Villages (CLVs) at Western Sydney University (Western), including hazing, sexual assault, sexual harassment, and increased levels of gender-based violence were reported through complaints and critical incidents at Behaviour Review Risk Operational Group, and to Wellbeing Services.

Concerns over student safety, issues of isolation, and potential cultural barriers to understanding acceptable behaviour, clearly identified a need for promotion, prevention, early intervention and systemic responses to wellbeing and associated gender-based violence issues across CLVs. *Building Safer Communities: Recognise, Respond and Refer*, uses a strengths-based, person-centred approach to build community, connection, and particularly, champion a culture of respect and safety, and gender equity and provide resources and support pathways for the prevention of violence and promotion of wellbeing and safety.

Building Safer Communities: Recognise, Respond and Refer has two key components.

Part 1

Building Safer Communities Workshops – co-designed and co-facilitated by Kim Copeland and the Mental Health and Wellbeing Team, with Residential Assistants (RAs) from the Western Sydney University (Western) Campus Living Villages (CLVs). Content included an overview of mental health and wellbeing, reflection on observed behaviours/concerns at CLVs, how to provide support, and where to refer students.

Workshop outcomes for RAs:

- Describe the 3-step model – Recognise, Respond and Refer.
- Demonstrate how to apply each step utilising case studies.
- Identify and explain the boundaries of roles when providing support to students.
- Apply the model in their role as RA.
- Knowledge of support services and referral pathways.

- Knowledge of behaviour and concerns in CLVs, to be utilised for resource development.

Part 2

A design consultant was engaged to create physical and digital resources for the *Building Safer Communities: Recognise, Respond and Refer* campaign. These resources support the model of Recognise, Respond, and Refer. They provide RAs, and Residents of CLVs clear support and refer options, linking to both university and external providers. Importantly, the support and refer options link directly to the We Support You, Support and Refer portals, identifying support specific to priority populations including LGBTIQ+, International or Women, and steps in reporting sexual offences.

Building Safer Communities: Recognise, Respond and Refer, key recommendations to Western Sydney University aim to ensure ongoing safety, support, and sustainability of outcomes. Recommendations are based on three guiding questions,

1. How do we keep our community, both students and staff safe?
2. How do we foster connection and belonging?
3. How do we support our community, both students and staff?

The two key recommendations are:

1. *Building Safer Communities: Recognise Respond and Refer* campaign is integrated into a yearly cadence.
2. A Coordinated Approach to Wellbeing at Campus Living Villages.

Please review the Recommendations section for further details on the implementation of these.

Itemised Budget Expenditure

Total funded amount \$ 5000.00

Date	Activity / Item	Cost (GST incl.)
1/11/23	Design Consultancy – Design Collateral for Building Safer Communities: Recognise, Respond and Refer Item 1 - Trifold Brochure Item 2 – Pocket Resource Item 3 – Poster Series Item 4 – Instagram Tiles	\$3000
16/11/23	Print Collateral for Building Safer Communities: Recognise, Respond and Refer 1000 x A3 Poster (8 Designs)	\$454.15
	2000 x Business Card/Pocket Resource	\$166.22
	2000 x Trifold A4 Flyer	\$1409.30
	Additional Printing Costs	In-Kind Mental Health and Wellbeing Team
	Workshop Facilitation Fees – Kim Copeland	In-Kind Mental Health and Wellbeing Team
Total expenditure:		\$ 5029.67

Research Report

Background Information:

National Student Safety Survey

Building Safer Communities: Recognise, Respond and Refer at Western Sydney University, was a response to the need to address results and specific outcomes of the National Student Safety Survey (NSSS), 2021, reporting high levels of sexual abuse and sexual harassment on university campuses (Heywood et al., 2022).

Key data from the NSSS includes:

- 1 in 6 students experienced sexual harassment, and 1 in 20 experienced sexual assault since starting university
- 1 in 2 knew some or all the perpetrators of sexual harassment and 2 in 3 knew some or all of the perpetrators of sexual assault.
- Approximately half of all who experienced sexual harassment or assault knew nothing or little about reporting assault and just under half knew nothing or little about seeking support or assistance for assault.
- The context of the most impactful incident, 43.3% of sexual harassment occurred in general campus areas. 25.3% of sexual assault occurred in student accommodation or residences

(Heywood et al., 2022, pp. 4-5)

Alarmingly, those living in student accommodation or residences were more likely to have been sexually harassed in a university context. **One quarter (24.0%) of students living in student accommodation or residences had experienced sexual harassment**, and one in five (19%) students living in student accommodation or residences had experienced sexual harassment in a university context in the past 12 months. Additionally, those reporting sexual harassment in the last 12 months, reported student accommodation or residences as the site of this harassment (Heywood, et al., 2022, p. 26).

Recommendations from the NSSS include:

- Promote safety and respect within residential accommodation settings
- Raising awareness among students and staff of the reporting processes within the university and the avenues of support available

- Improving reporting and support pathways for students who have both university context and other experiences of sexual harassment and/or sexual assault
- Adequately resourcing sexual harassment and sexual assault response and prevention strategies

(Heywood et al., 2022, p. 11)

Western Sydney University

At the Campus Living Villages (CLVs), there is a significant proportion of students who are international students. Anecdotal evidence suggests international students and students living on campus at CLVs, require improved support to ensure they are aware and informed of safety, specifically about sexual harassment, assault, and gender-based violence.

Anecdotal evidence is derived from observations by staff and reported experience at Western. Examples are deidentified and generalised for this report and include instances of students and staff seeking support, through various pathways at Western. These include direct referrals to Wellbeing Services, Campus Safety and Security and presentations to the Behaviour Review Risk Operational Group. Other sources of knowledge arise during the delivery of workshops and training to staff – CLV Managers and Residential Assistants, whereby participants identify needs and gaps – such as student experiences that demonstrate issues, challenges and case scenarios, specifically around sexual harassment, and safety. Additionally, in the event of critical events or safety incidents where CLV requests direct assistance from the Wellbeing Services/MHWBT to intervene, to support students who experience harm and/or are involved in critical incidents at CLV, students and staff often require debriefing, support, and referral to relevant specific services.

Ongoing issues at CLVs, including hazing, sexual assault, sexual harassment, and increased levels of gender-based violence reported through complaints and critical incidents at Behaviour Review Risk Operational Group, and to Wellbeing Services, and concerns over student safety, isolation, and potential cultural barriers to understanding acceptable behaviour, clearly identified a need for a systemic response to wellbeing and gender-based violence issues at Campus Living Villages, and Western Sydney University more broadly.

Mental Health and Wellbeing Team Community Engagement Model and Systemic Response

Currently, Wellbeing Services (Counselling, Welfare and Disability teams) and the Mental Health and Wellbeing Team (MHWBT) provide ongoing support and responsive engagement to CLVs, to support staff and support students. The MHWBT Community Engagement Model embeds sustainability into practice through Consultation, Reflection, Leadership and Collaboration. *Building Safer Communities: Recognise, Respond and Refer* reflects this model, as follows:

- *Consultation Part A* – MHWBT has engaged with CLVs through identified needs and risks to safety, aiming to support student and staff wellbeing (Residents, RAs, and Managers), and champion a culture of respect and equity.
- *Reflection* – Listening to RAs through Workshops (Part 1 outlined below) to identify needs, goals, and priorities.
- *Leadership* – Outlining recommendations through this report to embed sustainable, systemic safety into CLVs and university campuses, and providing support and referral pathways through *Recognise, Respond and Refer Resources*.
- *Collaboration* – Outlining collaborative partnership recommendations such as integrating CLV wellbeing and safety into existing systemic responses at Western. Advising on employment of Wellbeing Coordinator.
- *Consultation Part B* – Meeting with RAs/Managers of CLVs, Equity and Diversity, Wellbeing Services, WHS&W to continue to embed safety and wellbeing into university cadence/yearly cycle.

Contextual knowledge and evidence-based practice within the university sector support the need to address gaps and needs in student safety, and connection and belonging for the student community. Specifically, the students living in residential campus accommodation and international students are a focus area of needs and where a safety risk has been identified in the National Student Safety Survey 2021, Western Sydney University Wellbeing and Mental Health Strategy 2022-2026, and the Australian Universities Accord Interim Report, 2023.

Project Aims:

- To enhance awareness of consequences of gender-based violence on individuals, families, and communities.

- To champion a culture where respect and safety are prioritised within the campus environment.
- To nurture an environment among university students that upholds gender equity and mutual respect.
- To provide comprehensive resources and support systems that promote sustainable support, prevention of violence and promotion of wellbeing and safety.

Methodology

Building Safer Communities Part 1

Building Safer Communities Workshops – co-designed and co-facilitated by Kim Copeland and the Mental Health and Wellbeing Team, with Residential Assistants (RAs) from the Western Sydney University Campus Living Villages (CLVs). Content included an overview of mental health and wellbeing, reflection on observed behaviours/concerns at CLVs, how to provide support, and where to refer students.

Workshop outcomes for RAs:

- Describe the 3-step model – Recognise, Respond and Refer.
- Demonstrate how to apply each step utilising case studies.
- Identify and explain the boundaries of roles when providing support to students.
- Apply the model in their role as RA.
- Knowledge of support services and referral pathways.
- Knowledge of behaviour and concerns in CLVs, to be utilised for resource development.

Arising Themes from Workshops

The project revealed the following themes and opportunities for response and co-designing new processes to recruit, train and support staff and students applying for paid roles- Residential Assistant roles, which work to support students at CLVs.

1. There is a variation in understanding the role of RAs and what the expectations are in relation to intervening in safety and critical events. This may be best understood as RAs unclear of their required response to needs of student's safety and the boundaries of the role and required actions such as mandatory reporting and referral options.

1. Significant variation in awareness of support options both internal/external and in crisis/after-hours situations.
2. Difference in confidence in applying boundaries, due to uncertainty of responsibility, possible fear of losing friendship or insulting peers.
3. Variation in knowledge, skills and confidence related to specific issues, especially related to mental health and recognising safety issues related to sexual harm, offensive behaviour and assault.
4. Variation and lack of knowledge and practical skills in how to recognise, respond, and refer to relevant services.
5. No formal supervision or debriefing for RAs, specifically on wellbeing concerns.

Conclusions from Workshops

Part 1 of Building Safer Communities suggested that a coordinated and integrated approach to recruitment, training, and support of community leaders such as Residential Assistants is crucial to ensure those students in the role are equipped to manage the expectations and behaviours that occur at CLVs. Residential Assistants need to be informed with knowledge, resources, and tools to be better supported in their roles, to improve the culture at CLVs and increase the opportunity for improvement in the safety of all students.

Workshops also identified that there needs to be a strategic approach that strengthens the system rather than relying on response-based approaches to ensure sustainability and address ongoing concerns over safety, wellbeing, and culture. *Building Safer Communities: Recognise, Respond and Refer* provides a model and outline of a systemic and strategic approach to addressing these needs.

Building Safer Communities Part 2

A design consultant was engaged to create physical and digital resources for Recognise, Respond and Refer campaign. These resources support the model of Recognise, Respond, and Refer, outlined in workshops (Part 1), and provide RAs, and Residents of CLVs clear support and refer options, linking to both university and external providers. Importantly, the support and refer options link directly to the We Support You Campaign's Support and Refer portals, identifying support specific to priority populations including LGBTIQ+, International or Women, and steps in reporting sexual offences.

It is recommended that [Recognise, Respond, and Refer Resources](#) (posters, trifold flyer, and pocket resource), are to be displayed at CLVs and across Western campuses, and distributed in onboarding and training programs to Residents and RAs, and the student body at large through Wellbeing Services, Welcome Week, and MHWBT and Respectful Relationships workshops. Resources will be integral to the implementation of the key recommendations.

Building Safer Communities: Recognise Respond and Refer Recommendations and Conclusions

The two key recommendations from Parts 1 and 2 of Building Safer Communities are:

1. *Building Safer Communities: Recognise Respond and Refer* campaign is integrated into a yearly cadence.
2. A Coordinated Approach to Wellbeing at Campus Living Villages.

Please review the Recommendations section for further details on the implementation of these.

In conclusion, *Building Safer Communities: Recognise, Respond and Refer* is a pilot program that sets out guidelines for a systemic way to address gender-based violence, concerns over safety and isolation, and build wellbeing and health at Campus Living Villages and the Western campuses. Key to the sustainability of this program is the integration of Promotion, Prevention, Early Intervention and Systemic Response approaches to wellbeing and mental health. Research shows that the promotion of positive health and wellbeing, improving mental health literacy, and providing training opportunities (Western Sydney University, 2022), build connection and belonging, and mitigate against poor wellbeing, concerning behaviours and clinical presentations (van Agteren et al., 2021 and van Agteren et al., 2023).

The opportunity to strengthen the system, by integrating both the *Building Safer Communities: Recognise, Respond and Refer* campaign into a yearly cadence, and a *Coordinated Approach to Wellbeing at Campus Living Villages* is paramount to the successful culture change where all students experience safety and equity to a safe and positive place to live and learn.

Bibliography

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van Agteren, J., Iasiello, M., Lo, L., Bartholomaeus, J., Kopsaftis, Z., Carey, M., & Kyrios, M. (2021). A systematic review and meta-analysis of psychological interventions to improve mental wellbeing. *Nature Human Behaviour*, 5(5), 631–652.

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van Agteren J., Iasiello M. & Lo L. (2023). *A guide to what works for mental wellbeing*. Melbourne, Beyond Blue.

Western Sydney University. (2022). *Wellbeing and Mental Health Strategy 2022-2026*. Western Sydney University.

Appendices

Please see Appendices attached.

1. Western Sydney University Safer Communities RA Workshop – Case Studies – Master
2. Western Sydney University Safer Communities RA Workshop – Facilitator Guide
3. Western Sydney University Safer Communities RA Workshop – Master Slide Pack
4. Western Sydney University – Safer Communities RA Workshop – Mentimeter Results Summary
5. Recognise, Respond and Refer Trifold Flyer
6. Recognise, Respond and Refer Pocket Resource
7. Recognise, Respond and Refer Posters



Mel
2nd year student

Background

Mel moved from Wagga Wagga to CLV to study at WSU.

Mel doesn't have any contact with her family and is the first in her family to attend university.

When Mel first moved in, she was always arranging social activities for everyone and called herself the welcome committee for CLV.

Mel has been in a relationship with Charlie for about 6 months.

Current situation

Mel doesn't go out as much as she used to and seems to spend a lot of time in her room.

She has mentioned her grades have declined this year.

Mel doesn't arrange social activities anymore and checks with Charlie before making plans or spending time with friends.

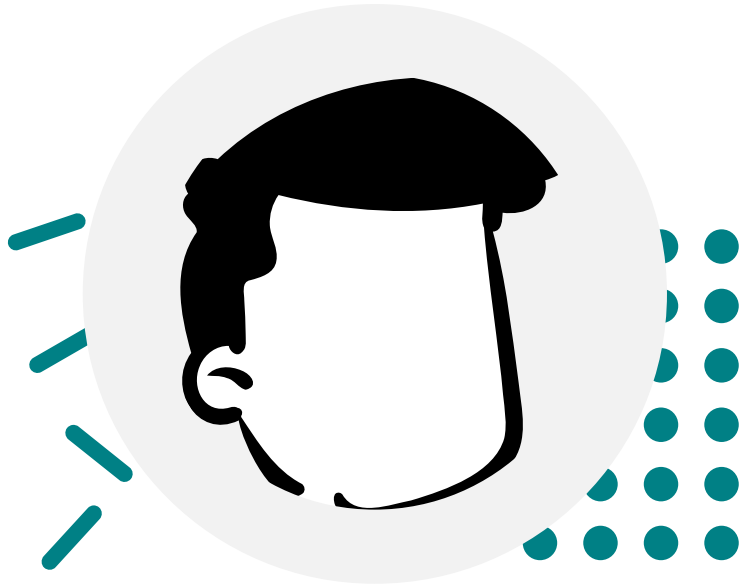
When Mel gets back after seeing friends, Charlie checks her phone and photos, and Charlie asks her about everything she did and who she spoke to.

Questions

1. What do you notice about this student that indicates they might benefit from a conversation, information or action?
2. What makes it hard to notice what is happening for a student?
3. What would help you to decide whether to act on what you have noticed?

4. What support might benefit this student?
5. What support is within the boundaries of your role?
6. What support is outside of the boundaries of your role?
7. What works when providing support to a student?

8. Where could you refer this student?
9. What works when making a referral?
10. What doesn't work when making a referral?



Jo
1st year student

Background

Jo is an international student from China.
Jo didn't know anyone in Sydney before moving here to study.

Jo has made a few friends, but generally keeps to themselves, focusing on study and work.

A few months ago, you heard a rumour that Jo was taken to hospital after they were found unconscious after taking a lot of non-prescription medication, but Jo hasn't talked to anyone about what happened.

Current situation

Jo has been studying a lot lately. You've noticed Jo's light on throughout most nights, and Jo looks tired all the time.

The last time you spoke, Jo mentioned they are worried about what their parents will think about their recent grades. During that conversation, Jo said caffeine is not enough to keep them going anymore with the amount of study they have to do. Jo said things were harder than they expected.

Jo is usually friendly but has been quiet and is not engaging in conversation with anyone.

Questions

1. What do you notice about this student that indicates they might benefit from a conversation, information or action?
2. What makes it hard to notice what is happening for a student?
3. What would help you to decide whether to act on what you have noticed?

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8. Where could you refer this student?
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10. What doesn't work when making a referral?



Jordan
1st year student

Background

Jordan grew up in Sydney, and has friends who came to study at WSU as well as friends in other parts of Sydney.

Jordan lives at CLV to reduce travel time and be close to where their classes are held.

Jordan is well-liked and social, and seems to enjoy living at CLV.

Jordan used to go home most weekends to see family and be closer to friends to be able to socialise without long commutes. Jordan hasn't been home for a few weeks.

Current situation

Jordan has had disagreements with some other students at CLV lately. It seems to be over small things, and Jordan's reactions don't make sense.

Jordan yelled at another student that they feel like leaving because they are going to fail anyway, and it is everyone's fault at CLV because of too much noise and distractions from studying.

Today, Jordan has been sitting outside and seems agitated. Some other students have mentioned this to you.

Questions

1. What do you notice about this student that indicates they might benefit from a conversation, information or action?
2. What makes it hard to notice what is happening for a student?
3. What would help you to decide whether to act on what you have noticed?

4. What support might benefit this student?
5. What support is within the boundaries of your role?
6. What support is outside of the boundaries of your role?
7. What works when providing support to a student?

8. Where could you refer this student?
9. What works when making a referral?
10. What doesn't work when making a referral?



Mel

2nd year student

Background

Mel moved from Wagga Wagga to CLV to study at WSU.

Mel doesn't have any contact with her family and is the first in her family to attend university.

When Mel first moved in, she was always arranging social activities for everyone and called herself the welcome committee for CLV.

Mel has been in a relationship with Charlie for about 6 months.

Current situation

Mel doesn't go out as much as she used to and seems to spend a lot of time in her room.

She has mentioned her grades have declined this year.

Mel doesn't arrange social activities anymore and checks with Charlie before making plans or spending time with friends.

When Mel gets back after seeing friends, Charlie checks her phone and photos, and Charlie asks her about everything she did and who she spoke to.

Questions

1. What do you notice about this student that indicates they might benefit from a conversation, information or action?
2. What makes it hard to notice what is happening for a student?
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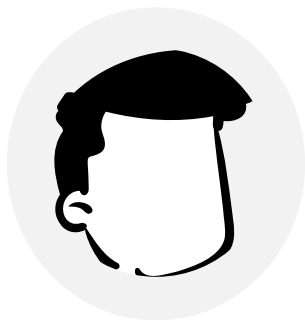
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Questions

1. Where could you refer this student?
2. What works when making a referral?
3. What doesn't work when making a referral?



Jo

1st year student

Background

Jo is an international student from China.

Jo didn't know anyone in Sydney before moving here to study.

Jo has made a few friends, but generally keeps to themselves, focusing on study and work.

A few months ago, you heard a rumour that Jo was taken to hospital after they were found unconscious after taking a lot of non-prescription medication, but Jo hasn't talked to anyone about what happened.

Current situation

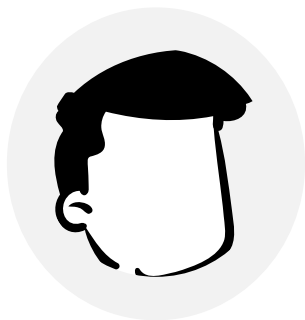
Jo has been studying a lot lately. You've noticed Jo's light on throughout most nights, and Jo looks tired all the time.

The last time you spoke, Jo mentioned they are worried about what their parents will think about their recent grades. During that conversation, Jo said caffeine is not enough to keep them going anymore with the amount of study they have to do. Jo said things were harder than they expected.

Jo is usually friendly but has been quiet and is not engaging in conversation with anyone.

Questions

1. What do you notice about this student that indicates they might benefit from a conversation, information or action?
2. What makes it hard to notice what is happening for a student?
3. What would help you to decide whether to act on what you have noticed?



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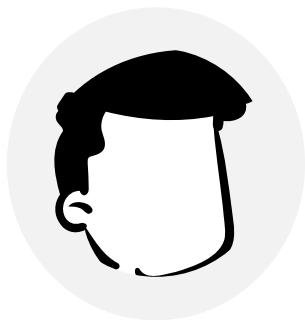
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1. Where could you refer this student?
2. What works when making a referral?
3. What doesn't work when making a referral?



Jordan

1st year student

Background

Jordan grew up in Sydney, and has friends who came to study at WSU as well as friends in other parts of Sydney.

Jordan lives at CLV to reduce travel time and be close to where their classes are held.

Jordan is well-liked and social, and seems to enjoy living at CLV.

Jordan used to go home most weekends to see family and be closer to friends to be able to socialise without long commutes. Jordan hasn't been home for a few weeks.

Current situation

Jordan has had disagreements with some other students at CLV lately. It seems to be over small things, and Jordan's reactions don't make sense.

Jordan yelled at another student that they feel like leaving because they are going to fail anyway, and it is everyone's fault at CLV because of too much noise and distractions from studying.

Today, Jordan has been sitting outside and seems agitated. Some other students have mentioned this to you.

Questions

1. What do you notice about this student that indicates they might benefit from a conversation, information or action?
2. What makes it hard to notice what is happening for a student?
3. What would help you to decide whether to act on what you have noticed?



Jordan

1st year student

Background

Jordan grew up in Sydney, and has friends who came to study at WSU as well as friends in other parts of Sydney.

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Today, Jordan has been sitting outside and seems agitated. Some other students have mentioned this to you.

Questions

1. What support might benefit this student?
2. What support is within the boundaries of your role?
3. What support is outside of the boundaries of your role?
4. What works when providing support to a student?



Jordan

1st year student

Background

Jordan grew up in Sydney, and has friends who came to study at WSU as well as friends in other parts of Sydney.

Jordan lives at CLV to reduce travel time and be close to where their classes are held.

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Today, Jordan has been sitting outside and seems agitated. Some other students have mentioned this to you.

Questions

1. Where could you refer this student?
2. What works when making a referral?
3. What doesn't work when making a referral?



Name
year student

Background

Current situation

Questions

1. What do you notice about this student that indicates they might benefit from a conversation, information or action?
2. What makes it hard to notice what is happening for a student?
3. What would help you to decide whether to act on what you have noticed?



Name
year student

Background

Current situation

Questions

1. What support might benefit this student?
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Name

year student

Background

Current situation

Questions

1. Where could you refer this student?
2. What works when making a referral?
3. What doesn't work when making a referral?



Name
year student

Background

Current situation

Questions

1. What do you notice about this student that indicates they might benefit from a conversation, information or action?
2. What makes it hard to notice what is happening for a student?
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Name
year student

Background

Current situation

Questions

1. What support might benefit this student?
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Name
year student

Background

Current situation

Questions

1. Where could you refer this student?
2. What works when making a referral?
3. What doesn't work when making a referral?



Name
year student

Background

Current situation

Questions

1. What do you notice about this student that indicates they might benefit from a conversation, information or action?
2. What makes it hard to notice what is happening for a student?
3. What would help you to decide whether to act on what you have noticed?



Name
year student

Background

Current situation

Questions

1. What support might benefit this student?
2. What support is within the boundaries of your role?
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4. What works when providing support to a student?



Name
year student

Background

Current situation

Questions

1. Where could you refer this student?
2. What works when making a referral?
3. What doesn't work when making a referral?

Safer Communities RA Workshop

Facilitator Guide

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Overview

Learning Objectives

At the end of this session, participants will be able to:

- Describe the three steps of the model – Notice, Support and Refer.
- Demonstrate how to apply each step of the model to case studies.
- Apply the model in their role as an RA.
- Explain the boundaries of their role when providing support to students.

Session time

- The training session will take a minimum of two hours.
- You will need to determine how to allocate your time for each topic, depending on the group and the time you have allocated for the training.
- If additional time is available, consider:
 - Having each RA introduce themselves and tell the group what they are studying, which campus they live and study on and how long they have been an RA.
 - Including further information about how the health, mental health and wellbeing of students directly relates to their studies.
 - Developing a case study with the group based on common issues they notice or respond to in their role.
 - Extending discussions at each stage of the case studies.
 - Introducing referral options in more detail, explaining how to access services and what students can expect when they make contact with services to facilitate effective RA referrals.

Target audience

- Students employed in leadership or adviser roles in residential accommodation.
- Students with a leadership or advising role in residential accommodation in exchange for benefits, such as accommodation scholarships.
- Staff in residential settings – to reinforce the model and provide staff with a common language to coach student leaders to best support students.

Preparation Check list

Mentimeter

Design a Mentimeter presentation with the following slides:

1. Instructions

- a. This slide will be automatically generated when you select +New Slide and select Instructions. You need to generate this to obtain the QR code and code for web-based access to include in the PowerPoint presentation.

2. Check in

- a. Select a scale slide type.
- b. Insert the following five statements:
 - i. I have a good understanding of the health, mental health and wellbeing issues Australian university students face.
 - ii. I feel confident that I can notice when a student would benefit from support.
 - iii. I feel equipped to respond to student concerns or issues.
 - iv. I feel confident providing support to a student about concerns or issues they are experiencing.
 - v. I seek advice to support a student if I am unsure about what to do.
- c. Amend the scale on the dimensions tab to range from 1 to 10, with the following points labelled:
 - 1 = Strongly disagree
 - 3 = Disagree
 - 5 = Neutral
 - 8 = Agree
 - 10 = Strongly agree

3. Notice

- a. Select an open-ended slide type.
- b. In the question field write, "What are you noticing in your role as an RA?".
- c. In the subheading field, write "You can enter multiple responses. List each one separately. Use a single word or brief description".
- d. Make sure you enable multiple submissions.

4. Support

- a. Select an open-ended slide type.
- b. In the question field write, "What types of support do you provide to students?".
- c. In the subheading field, write "List the types of support you provide students. List each type separately. A single word is ok".
- d. Make sure you enable multiple submissions.

5. Refer

- a. Select a scale slide type.
- b. In the question field write, "Where do you refer students you provide support to?".
- c. In the description field, write "Rank the types of support from the most frequent to the least frequent types of support you provide".

- d. Insert the following eight options:
 - i. Guidelines, procedures or policies.
 - ii. National helpline (1800) phone number
 - iii. University services
 - iv. CLV staff
 - v. External services
 - vi. Website – external
 - vii. Website – WSU
 - viii. Other
- e. Amend the scale on the dimensions tab to range from 1 to 10, with the following points labelled:
 - 1 = Never
 - 3 = Rarely
 - 5 = Occasionally
 - 8 = Sometimes
 - 10 = Frequently

6. Reflection

- a. Select a scale slide type.
- b. In the question field write, “Reflection. Following the Workshop....”.
- c. Insert the following six statements:
 - i. I have an increased understanding of the health, mental health and wellbeing issues Australian university students face.
 - ii. I feel more confident that I can notice when a student would benefit from support.
 - iii. I feel better equipped to respond to student concerns or issues.
 - iv. I feel more confident providing support to a student about concerns or issues they are experiencing.
 - v. I am more likely to seek advice to support a student if I am unsure about what to do.
 - vi. I am likely to use the Notice, Support, Refer model in my role as an RA.
- d. Amend the scale on the dimensions tab to range from 1 to 10, with the following points labelled:
 - 1 = Strongly disagree
 - 3 = Disagree
 - 5 = Neutral
 - 8 = Agree
 - 10 = Strongly agree

7. Application

- a. Select an open-ended slide type.
- b. In the question field write, “What is one thing you will do differently following today’s workshop?”.

Powerpoint Slides

Make amendments to the following slides.

#	Slide Title	Amendment Required
1	Building Safer Communities	Amend presenter names and logos, as required.
4	Check In	Insert Mentimeter QR code and the numerical code for web-based access.
17	What are you noticing?	Insert Mentimeter QR code and the numerical code for web-based access.
20	How do you provide support as an RA?	Insert Mentimeter QR code and the numerical code for web-based access.
23	Where do you refer students?	Insert Mentimeter QR code and the numerical code for web-based access.
27	Reflection	Insert Mentimeter QR code and the numerical code for web-based access.
28	Next steps	Amend message about what you want participants to do and plans for follow up (if any).

Scenarios

- Check the scenarios to ensure they are relevant, or use the blank template to create new scenarios.
- Check if there have been any recent events which may impact the training or require the avoidance or inclusion of particular scenarios.

Equipment/Resources

- Printing:
 - Sign in sheet.
 - Facilitator copies of case studies.
 - Case study worksheets (at least one copy of each case study per table group for each set of questions). You will have three sets of questions for each case study.
- Pens/markers for participants to make notes during their case study discussions.
- Laptop/cords to connect to audio visual equipment.

Configuration of the training room

- Participants should be seated in groups at tables with enough room to complete small group work. Where possible, the number of groups should match the number of scenarios (i.e. if there are three scenarios, either 3, 6 or 9 table groups).
- Groups should be spaced so they will not be easily distracted by each other during small group work, but where they can hear from members of other groups during large group discussions.
- Each table should have pens or markers for participants to record the points of their small group discussions.

Training Content

Title Page



Topic	Key Points
Introduction	1. Introduce facilitators. 2. Acknowledgement of Country.

Example of Acknowledgement of Country from an individual¹

I would like to acknowledge that today's meeting/event/class is being held on the country of the (insert name of traditional owner) People and acknowledge their ancestors who have been Traditional Owners of their country for tens of thousands of years. I also acknowledge and pay my respect to Elders past and present.

Campus location	Traditional Owners
Bankstown	Darug Nation
Campbelltown	Bidjigal People of the Dharawal Nation (also referred to as the Tharawal Nation)
Hawkesbury	Boorooberongal People of the Darug Nation
Lithgow	Wiradjuri Nation
Liverpool	Darug Nation
Nirimba	Darug Nation
Parramatta City	Burramattagal People of the Darug Nation
Parramatta South	Burramattagal People of the Darug Nation
Penrith	Darug Nation
Sydney City	Gadigal People of the Eora Nation
Sydney Olympic Park	Wangal People of the Eora Nation

¹ Source:

https://www.westernsydney.edu.au/_data/assets/pdf_file/0004/1846093/Acknowledgement_of_Country_Protocol_document_May_2021.pdf

Outline of Workshop

**Building Safer Communities**

Today's Workshop

1. Check in
2. Health, mental health and wellbeing of students
3. Why is it important to notice what is happening?
4. What are you noticing?
5. How do you provide support to students?
6. Where do you refer students?
7. Reflection
8. Next steps

Topic	Key Points
Today's Workshop	1. Outline content and format of workshop. 2. Let participants know the workshop is interactive. 3. Let participants know they will need to have their phones out.

Check In

**Check in**

ACTIVITY

Instructions

Scan the QR code
or go to:
www.menti.com
and enter the code:
XXXX XXXX

Insert Mentimeter
QR code

Code: XXXX XXXX

Topic	Key Points	Activities
Check In	1. Explain Mentimeter and that it will be used throughout the workshop. 2. Ask students to connect to Mentimeter using their phone or on their laptop at www.mentimeter.com (and enter the code on the screen) and answer the questions. 3. Let participants know their responses are anonymous.	Mentimeter

Health, Mental Health and Wellbeing of University Students



Health, Mental Health and Wellbeing of University Students



HEALTH

A state of complete physical, mental and social wellbeing and not merely the absence of disease or infirmity.

MENTAL HEALTH

A state of mental wellbeing that enables people to cope with the stresses of life, realise their abilities, learn well, work productively and contribute to their community.

WELLBEING

The state of being comfortable, healthy or happy encompassing quality of life and the ability to contribute to society with a sense of meaning and purpose.

Topic	Key Points
Health, Mental Health and Wellbeing of University Students	- Briefly describe the definitions of each term: HEALTH A state of complete physical, mental and social wellbeing and not merely the absence of disease or infirmity. MENTAL HEALTH A state of mental wellbeing that enables people to cope with the stressors of life, realise their abilities, learn well, work productively and contribute to their community. WELLBEING The state of being comfortable, healthy or happy, encompassing quality of life and the ability to contribute to society with a sense of meaning and purpose. - Acknowledge the terms are often used interchangeably. - Explain that all of these factors impact study at university either positively or negatively.

WESTERN SYDNEY UNIVERSITY

What are we noticing?



- Transition and adjustment
- Stress
 - Academic
 - Personal
 - Financial
- Health and wellbeing
- Pressure to Perform
 - Self-expectations
 - Expectations of family
- Loneliness and social isolation
- Age of onset of mental health conditions
- Risk of hazing, sexual harassment and sexual assault
- Mental health literacy
- Difficulties navigating support services

[illegible]

Topic	Key Points
What are we noticing?	1. There is a lot of data about the health, mental health and wellbeing of university students in Australia and internationally, from research, surveys and students' use of university support services.
	ANIMATION: Click nine times to reveal more information about each of the nine issues listed.
	2. The 9 panels of information will appear in the following order: i. Transition and adjustment; ii. Stress; iii. Health and wellbeing; iv. Pressure to perform; v. Loneliness and social isolation; vi. Age of onset of mental health conditions; vii. Risk of hazing, sexual harassment and sexual assault; viii. Mental health literacy; and ix. Difficulties navigating support services.

- You can adjust this section to suit the audience.
- On the Master PowerPoint pack this slide is set to show the explanatory panel for each dot point (outlined on each of the following 9 pages).
- The following 9 slides have been hidden in the Master PowerPoint pack to enable editing. You can read more about the key points for each of the common issues students face and see links for further optional reading/information to prepare for the session on the next 9 pages.

Notes and Further Reading/Resources

Transition and Adjustment



- Transition and adjustment
- Stress
 - Academic
 - Personal
 - Financial
- Health and wellbeing
- Pressure to Perform
 - Self-expectations
 - Expectations of family
- Loneliness and social isolation
- Age of onset of mental health conditions
- Risk of hazing, sexual harassment and sexual assault
- Mental health literacy
- Difficulties navigating support services

Transition and Adjustment

- New ways of learning
- New environment
- New people
- Relocating
- Changes in access to support systems
- Changes in friends and friendships
- Social changes
- Health and wellbeing
- Diet and sleep
- Acculturation

Issue	Key Points
Transition and Adjustment	▪ All university students are transitioning and adjusting in some way, e.g.: – From high school to tertiary study or from work back to study; – Life stages, changes in relationships; – Independent living, changes in finance, new social environments; – Away from friends and family (their usual supports); and/or – For international students, to a new country. ▪ Transition and adjustment can be difficult. Everyone responds differently. ▪ People may not be aware of the impact of change on themselves. ▪ Challenges with transition and adjustment, especially at the start of tertiary study, can have negative impacts if not addressed. ▪ RAs play an important role in helping students with transition and adjustment by helping students connect with others, providing information and being a point of contact when students arrive in their accommodation.
Further Reading/Resources about Transition and Adjustment for Students	
Transition and Adjustment	▪ <u>The Transition Experience of Australian Students to University: The Importance of Social Support (ecu.edu.au)</u> ▪ <u>Social Adjustment and Transition to University for Mature-Age, Undergraduate Students</u> ▪ <u>Full article: Navigating entry into higher education: the transition to independent learning and living (tandfonline.com)</u> ▪ <u>Academic adjustment of first year students and their transition experiences: The moderating effect of social adjustment SpringerLink</u> ▪ <u>Transition Models and How Students Experience Change (enhancementthemes.ac.uk)</u>

Stress



What are we noticing?



- Transition and adjustment
- Stress
 - Academic
 - Personal
 - Financial
- Health and wellbeing
- Pressure to Perform
 - Self-expectations
 - Expectations of family
- Loneliness and social isolation
- Age of onset of mental health conditions
- Risk of hazing, sexual harassment and sexual assault
- Mental health literacy
- Difficulties navigating support services

Stress

- Academic
 - Changes
 - Study mode
 - Content
- Personal
 - Relationships
 - Identity
 - Balancing family and study
- Financial
 - Cost of living
 - Balancing work and study

Issue	Key Points
Stress	▪ All university students experience stress. ▪ Tertiary study is challenging. ▪ Ongoing stress impacts our health and wellbeing, and the way our brain functions. This impacts our ability to learn. ▪ Academic stress is common, e.g. as students: – learn new content; – experience new ways of learning; – manage competing priorities such as multiple assessment due dates; – participate in group assessment tasks; – experience failure; and/or – struggle to meet academic demands. ▪ Personal stress can occur when students are: – Away from usual social networks and supports; – Balancing multiple priorities, such as work and study or family and study; – Exploring their identity; and/or – Managing relationships with others. ▪ Financial stress is common for tertiary students, e.g.: – Cost of living, including housing, healthy food options, transport/fuel costs, etc.; and/or – Balancing work and study.
Further Reading/Resources about Stress and its Impacts on Students	
Stress	▪ Stress-and-its-impact-on-you-fact-sheet.pdf (blackdoginstitute.org.au) ▪ (PDF) The impact of stress on students in secondary school and higher education (researchgate.net) ▪ (PDF) Academic Stress and Mental Well-Being in College Students: Correlations, Affected Groups, and COVID-19 (researchgate.net)

Health and Wellbeing



What are we noticing?



- Transition and adjustment
- Stress
 - Academic
 - Personal
 - Financial
- Health and wellbeing
- Pressure to Perform
 - Self-expectations
 - Expectations of family
- Loneliness and social isolation
- Age of onset of mental health conditions
- Risk of hazing, sexual harassment and sexual assault
- Mental health literacy
- Difficulties navigating support services

Health and Wellbeing

- Physical
- Emotional
- Cognitive
- Social
- Spiritual
- Cultural

Can be further impacted by:

- Financial impacts
- Impacts of stress
- Diet and exercise
- Nutrition

Issue	Key Points
Health and Wellbeing	▪ There are several domains of health and wellbeing. ▪ This is not an exhaustive list. ▪ These domains can be impacted by a range of things, including but not limited to: – Stress; – Physical activity – the transition to tertiary study has been shown to be associated with one of the biggest changes in the lifespan in physical activity for most people. Tertiary students tend to be more sedentary than the period of time immediately before they commence university; – Diet and nutrition (which can be impacted by financial pressures and time pressures) impact our health; – Sleep – poor sleep impacts our brain and our ability to learn; and/or – Interactions with others.
Further Reading/Resources about the Health and Wellbeing of University Students	
Health and Wellbeing	▪ Home - Enhancing Student Wellbeing for Learning (unistudentwellbeing.edu.au) ▪ mental health benefits of work & study headspace ▪ Determinants of wellbeing in university students: The role of residential status, stress, loneliness, resilience, and sense of coherence SpringerLink ▪ TowardsHealthPromotingUniversity_SummaryReport2020.pdf (unimelb.edu.au)

Pressure to Perform



What are we noticing?



- Transition and adjustment
- Stress
 - Academic
 - Personal
 - Financial
- Health and wellbeing
- Pressure to Perform
 - Self-expectations
 - Expectations of family
- Loneliness and social isolation
- Age of onset of mental health conditions
- Risk of hazing, sexual harassment and sexual assault
- Mental health literacy
- Difficulties navigating support services

Pressure to Perform

- Self-expectations
 - Perfectionism
 - Hope
 - Aspirations
 - Future career goals
- Expectations of family
 - Intended and unintended
 - Future career goals
 - Reputation
 - Security and stability

Issue	Key Points
Pressure to Perform	▪ Pressure to perform can be internal or external. ▪ Self-expectations, which can be influenced by: – Aspirations and future goals; and /or – Prior performance, and expectations to maintain grades in a new learning environment. ▪ Expectations of others, particularly for students who are: – First in family; – Financially supported by others to study, e.g., family/employer; – Regularly contacted by parents to check on progress; – Required to obtain the award to maintain current employment or for future employment opportunities; and/or – Studying to improve the financial stability for their family. ▪ International students face additional pressure to perform due to: – Visa requirements; – The cost of study; and/or – Expectations of others, often related to financial support from family, future goals, family visas, and reputational concerns.
Further Reading/Resources about Pressure to Perform and its Impacts on Students	
Pressure to Perform	▪ Young people's perceptions of their parents' expectations and criticism are increasing over time: Implications for perfectionism - PubMed (nih.gov) ▪ Family and Academic Stress and Their Impact on Students' Depression Level and Academic Performance - PMC (nih.gov) ▪ Parent pressure tied to student perfectionism Times Higher Education (THE) ▪ (PDF) Title: Assessment of Parental Pressure and Peer Factors Affecting the Performance of Undergraduate Nursing Students Studying in Selected Nursing Colleges (researchgate.net)

Loneliness and Social Isolation



What are we noticing?



- Transition and adjustment
- Stress
 - Academic
 - Personal
 - Financial
- Health and wellbeing
- Pressure to Perform
 - Self-expectations
 - Expectations of family
- Loneliness and social isolation
- Age of onset of mental health conditions
- Risk of hazing, sexual harassment and sexual assault
- Mental health literacy
- Difficulties navigating support services

Loneliness and Social Isolation

- Moving away from home
- Away from friends
- New environment
- Identity
- Social anxiety
- New culture
- Work demands
- Priorities
- Balancing work, study and home
- Placements

Issue	Key Points
Loneliness and Social Isolation	▪ The first three months of university are often described as the period many university students experience loneliness and social isolation. ▪ Students are often studying in a new environment away from their usual peer group. ▪ Having a sense of connection and belonging is important to our mental health and wellbeing. ▪ Loneliness increases the likelihood of poor mental health outcomes and can increase anxiety. ▪ It is important to create opportunities for students to make connections, such as through orientation activities, social events, clubs and associations. ▪ RAs play an important role in reducing loneliness and isolation.
Further Reading/Resources about Loneliness and its Impacts on Students	
Loneliness and Social Isolation	▪ <u>Loneliness, Belonging, and Mental Health in Australian University Students Pre- and Post-COVID-19 Behaviour Change Cambridge Core</u> ▪ <u>Brakespear Young adults dealing with loneliness at university New Vistas (uwl.ac.uk)</u> ▪ <u>Risk factors for loneliness: The high relative importance of age versus other factors PLOS ONE</u> ▪ <u>Loneliness and Mental Health report - UK Mental Health Foundation</u> ▪ <u>Review: Interventions addressing loneliness amongst university students: a systematic review - Ellard - Child and Adolescent Mental Health - Wiley Online Library</u>

Age of Onset of Mental Health Conditions



What are we noticing?



- Transition and adjustment
- Stress
 - Academic
 - Personal
 - Financial
- Health and wellbeing
- Pressure to Perform
 - Self-expectations
 - Expectations of family
- Loneliness and social isolation
- Age of onset of mental health conditions
- Risk of hazing, sexual harassment and sexual assault
- Mental health literacy
- Difficulties navigating support services

Age of Onset of Mental Health Conditions

Research world wide shows that of those students who are diagnosed with mental ill health while at university:

- 50% had pre-existing conditions
- 50% reported onset of symptoms after commencing study.

Issue	Key points
Age of Onset of Mental Health Conditions	▪ Young Australians (18-24yo) have the highest prevalence of mental illness than any other age group. ▪ Around half of the students who are diagnosed or will meet the criteria to be diagnosed for mental health conditions while at university will already have experienced symptoms. This means: – They may have already developed effective strategies for managing symptoms; and/or – They may experience an increase in symptoms as they transition to university or when experiencing stress. ▪ Around half of the students who are diagnosed or will meet the criteria to be diagnosed for mental health conditions while at university will develop those symptoms while studying. This means: – Information about mental health and support available is important; – Normalising conversations about mental health can help; and – Noticing signs and knowing how to offer support and refer students to services if they need them are important skills for RAs.
Further Reading/Resources about the Age of Onset/Prevalence of Mental Health Conditions	
Age of Onset of Mental Health Conditions	▪ Mental health in higher education - Enhancing Student Wellbeing for Learning (unistudentwellbeing.edu.au) ▪ Prevalence and impact of mental illness - Mental health - AIHW ▪ Mental health Australian Bureau of Statistics (abs.gov.au) ▪ Prevalence of mental health issues within the student-aged population - Education Policy Institute (epi.org.uk)

Risk of Hazing, Sexual Harassment and Sexual Assault



What are we noticing?



- Transition and adjustment
- Stress
 - Academic
 - Personal
 - Financial
- Health and wellbeing
- Pressure to Perform
 - Self-expectations
 - Expectations of family
- Loneliness and social isolation
- Age of onset of mental health conditions
- Risk of hazing, sexual harassment and sexual assault
- Mental health literacy
- Difficulties navigating support services

Risk of Hazing, Sexual Harassment and Sexual Assault

The 2021 National Student Safety Survey (NSSS), found that in Australia:

- 1 in 6 students have experienced sexual harassment since starting university
- 1 in 90 students have experienced sexual assault
- Only 1 in 20 impacted students formally report the incident

Issue	Key Points
Risk of Hazing, Sexual Harassment and Sexual Assault	▪ Everyone has the right to study, work and live in a safe environment. ▪ Everyone has the responsibility to behave in a way that ensures the safety of others and complies with our policies and codes of conduct. ▪ As a university we are committed to addressing this issue. ▪ There is support available for students who experience hazing or sexual violence. ▪ We also encourage students to report incidents. ▪ RAs have an important role to play in reporting behaviour that breaches our policies (including our Motting and Hazing Prevention Policy). ▪ As staff members, RAs need to follow these policies. (<i>This point is to help RAs understand they are considered staff and if they see or hear about behaviour that suggests hazing or sexual violence, they must report it or talk to a staff member</i>).
Further Reading/Resources about University Hazing, Sexual Harassment & Sexual Assault	
Risk of Hazing, Sexual Harassment and Sexual Assault	▪ Motting and Hazing Prevention Policy / Policy DDS (westernsydney.edu.au) ▪ Student Misconduct Rule Western Sydney University ▪ Results National Student Safety Survey (nsss.edu.au) ▪ National Student Safety Survey Western Sydney University

Mental Health Literacy



What are we noticing?



- Transition and adjustment
- Stress
 - Academic
 - Personal
 - Financial
- Health and wellbeing
- Pressure to Perform
 - Self-expectations
 - Expectations of family
- Loneliness and social isolation
- Age of onset of mental health conditions
- Risk of hazing, sexual harassment and sexual assault
- Mental health literacy
- Difficulties navigating support services

Mental health literacy

- Varies greatly between students
- Depends on our exposure to the information previously
- Impacts awareness of signs and symptoms
- Impacts help seeking
- Lower mental health literacy reduces the likelihood of seeking help
- A skill that benefits students in their future careers

Issue	Key Points
Mental Health Literacy	▪ Mental health literacy includes: – The ability to recognise signs and symptoms of mental health; problems or signs of psychological stress/distress; – Understanding risk factors and causes; – Knowing how to seek mental health information; – Understanding self-treatments; – Knowing about professional help available; and – Having attitudes and behaviours that promote recognition and appropriate help-seeking. ▪ Mental health literacy varies between students, due to factors such as: – Exposure to information; – Previous education about mental health; – Exposure to positive or negative attitudes about mental health; – Country of origin; and/or – Cultural considerations.
Further Reading/Resources about Mental Health Literacy and University Students	
Mental Health Literacy	▪ Improving the mental health of young people in tertiary education (vu.edu.au) ▪ Improving university students' mental health literacy using experiential learning opportunities - Arianne Reis, Vivien Nguyen, Rowena Saheb, Erin Rutherford, Sandro Sperandei, 2023 (sagepub.com) ▪ Mental health-related knowledge, attitudes and behaviours in a cross-sectional sample of Australian university students: a comparison of domestic and international students BMC Public Health Full Text (biomedcentral.com)

Difficulties Navigating University Support Services



What are we noticing?



- Transition and adjustment
- Stress
 - Academic
 - Personal
 - Financial
- Health and wellbeing
- Pressure to Perform
 - Self-expectations
 - Expectations of family
- Loneliness and social isolation
- Age of onset of mental health conditions
- Risk of hazing, sexual harassment and sexual assault
- Mental health literacy
- Difficulties navigating support services

Difficulties navigating university support services

- Orientation
- Get to know services before you need them
- Linked to mental health literacy
- Requires an ability to recognise signs and symptoms
- Can be overwhelming
- Stigma and barriers
- Transactional view of study
- Academic versus personal matters

Issue	Key Points
Difficulties Navigating University Support Services	▪ There are a range of services and programs in universities to help students manage the challenges of tertiary study. ▪ While we aim to let students know about what is available, information about support is often provided initially during orientation which means many students don't retain that information. ▪ Being able to notice when a student might benefit from support, provide information to them about the services or programs available, and information about how to access support reduces barriers to students getting help when they need it. ▪ Being aware of the support services the university offers as an RA means you can explain what they are and how to access them to a student who would benefit from help. ▪ We will talk about this later when we talk about how to effectively refer students to services or other support.
Further Reading/Resources about Navigating and Accessing University Support Services	
Difficulties Navigating University Support Services	▪ <u>Student mental health profiles and barriers to help seeking: When and why students seek help for a mental health concern - Sheffield Hallam University Research Archive (shu.ac.uk)</u> ▪ <u>Navigating the complexity of disability support in tertiary education: perspectives of students and disability service staff: International Journal of Inclusive Education: Vol 21, No 8 (tandfonline.com)</u> ▪ <u>Breaking down barriers to seeking help ReachOut Schools</u> ▪ <u>Understanding the mental health and help-seeking behaviours of refugees Australian Institute of Family Studies (aifs.gov.au)</u> ▪ <u>(PDF) Exploring the barriers and facilitators to accessing and utilising mental health services in regional, rural, and remote Australia: A scoping review protocol (researchgate.net)</u>

Notice

Why is it Important to Notice What is Happening?



Why is it important to notice what is happening?



Topics	Key Points
Introducing the model	- Briefly describe the model: NOTICE - Signs that a student would benefit from a conversation or support. - When we notice what is happening for students, we can check in and provide support if the situation warrants it. SUPPORT - Provide appropriate support with empathy and compassion within the boundaries of the role of an RA. - Support takes many forms, which we will talk about using case studies to guide our discussion. REFER - If required, to a suitable person, policy, service or program. - Not all situations require referrals, but we will talk about when they might and what works when making a referral. - Explain that we will discuss each stage of the model and use fictitious case studies to practice applying each step.

What are You Noticing?



What are you noticing?

ACTIVITY

Instructions

Using Mentimeter, tell us what you are noticing about the challenges and issues students are experiencing.

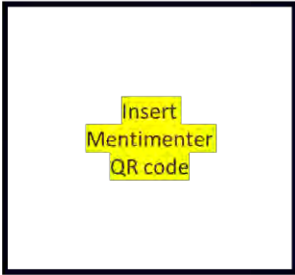
You can enter multiple responses.

List each type of support separately.

Use a single word or very brief description.

What are you noticing in your role as an RA?

Scan the QR code if you need to rejoin Mentimeter:



Code: XXXX XXXX

You might consider:

- What do students struggle with?
- What are the common things you help students with?
- What are the issues students raise with you?
- What concerns do you have or do others share with you?
- Are there themes you notice in the issues students face?

Topic	Key Points	Activities
Noticing	1. Ask students to return to Mentimeter using their phone or laptop and answer the questions. 2. Let students know they can reconnect at any time using the QR code on the screen or online at www.mentimeter.com and entering the code on the screen. 3. Remind participants their responses are anonymous.	Mentimeter
	ANIMATION: Once students have connected to Mentimeter, click to reveal the box with suggestions on what students might consider to prompt their thinking.	

What Are Some of the Signs Someone Might Benefit from Support?



Noticing – What are some of the signs someone might benefit from support?



- Asking for help
- Social withdrawal
- Talking about feeling:
 - stressed
 - sad
 - lonely
 - depressed
 - anxious
 - overwhelmed
- Changes in:
 - behaviour
 - sleep patterns
 - academic performance
 - emotions
 - appearance
- Substance abuse

If you are not sure, you can ask yourself:

1

Has the behaviour persisted for a while?

2

Is the behaviour interfering with the student's study, work and/or life?

3

Is the behaviour causing distress for the student, their peers and/or others?

4

Is the behaviour risky or could cause harm to them or others?

Topic	Key Points
Noticing	1. Everyone is different. 2. This slide is not an exhaustive list. It shows a summary of some of the common signs we see: ▪ Students asking for help; ▪ Social withdrawal; ▪ Students talking about how they are feeling; ▪ Changes in behaviour; and/or ▪ Increased substance use. 3. As you get to know the students in your accommodation, it becomes easier to notice changes.
	ANIMATION: Click to reveal the four questions on the right.
	4. If you are not sure if what you are noticing indicates someone would benefit from support or action, it is useful to ask yourself these questions: i. Has the behaviour persisted for a while? ii. Is the behaviour interfering with the student's study, work or life? iii. Is the behaviour causing distress for the student, their peers and/or others? iv. Is the behaviour risky or could cause harm to them or others?

Group Activity – Case Study



Noticing



GROUP ACTIVITY

Read the information about the student your group has been allocated and answer the following questions:

1. What do you notice about this student that indicates they might benefit from a conversation, information or action?
2. What makes it hard to notice what is happening for a student?
3. What would help you to decide whether to act on what you have noticed?

Topic	Key Points	Activities
Noticing	1. Allocate 1 case study to each table. 2. Students will use the case studies their table group has been allocated to guide a discussion based on 3 questions: i. What do you notice about this student that indicates they might benefit from a conversation, information or action? ii. What makes it hard to notice what is happening for a student? iii. What would help you to decide whether to act on what you have noticed? 3. Ask students to make notes of their discussion using the case study worksheet. 4. Let students know we will be discussing each case study and the group's responses in the large group once they are finished.	Table group discussions guided by case studies
	5. Have each table group read out their case study and present their key points for each question to the large group. Allow time for this step, as each group has a different scenario.	Sharing outcomes of table group discussions
	6. Facilitate a large group discussion, adding any additional points the groups may have missed.	Whole group discussion

Support

How Do You Provide Support as an RA?



How Do You Provide Support as an RA?



ACTIVITY

Instructions

Using Mentimeter, tell us about the types of support you provide students.

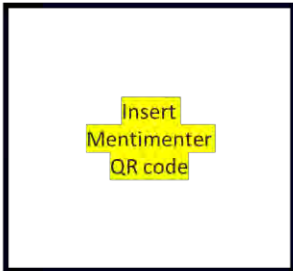
Use a single word or very brief description.

You can enter multiple responses.

List each type of support separately.

What types of support do you provide to students?

Scan the QR code if you need to rejoin Mentimeter:



Insert
Mentimeter
QR code

Code: XXXX XXXX

Topic	Key Points	Activities
Support	1. Ask students to return to Mentimeter using their phone or laptop and answer the question. 2. Let students know they can reconnect at any time using the QR code on the screen or online at www.mentimeter.com and entering the code on the screen. 3. Remind participants their responses are anonymous.	Mentimeter

Providing Support



Support



- Let them know what you have noticed
- Have a conversation
- Listen
- Be non-judgemental
- Validate their feelings
- Be patient
- Ask them what they need
- Encourage self-care
- Provide information, resources, and/or support
- Be mindful of boundaries
- Educate yourself and be prepared to provide support

If appropriate to the situation:

- Offer practical support
- Explain how to access support
- Encourage professional help
- Check in later

Remember, if you are in doubt:

Seek advice

Call for help

Topic	Key Points
Support	1. Support takes a range of forms It can be as simple as a conversation or a quick check in to let someone know you've noticed something and inviting them to have a conversation. 2. Talk about the importance of: ▪ Listening; ▪ Normalising/validating the student's concern, feelings or problem; ▪ Letting people choose whether they engage in a conversation and what happens next; and ▪ Maintaining your boundaries 3. Provide examples of how to do this using the notice and support steps of the model, such as: ▪ "I've noticed you've been quiet lately. Is everything ok?" ▪ "I've noticed you haven't been to any social events lately. I was wondering if you are ok?" ▪ "I've noticed you seem stressed at the moment. Do you want to talk about anything?" ▪ "I can see that you are upset. Is there anything I can do?" ANIMATION: Click to reveal additional things to do if appropriate. 4. Explain that practical support, professional help and checking in later is not relevant to every situation. ANIMATION: Click to reveal the box that states: "Remember if you are in doubt: Seek advice; call for help". 5. Reinforce the importance of seeking advice or help.

Group Activity – Case Study

**Support**

GROUP ACTIVITY

Read the information about the student your group has been allocated and answer the following questions:

1. What support might benefit this student?
2. What support is within the boundaries of your role?
3. What support is outside of the boundaries of your role?
4. What works when providing support to a student?

Topic	Key Points	Activities
Support	1. Allocate 1 case study to each table, making sure each table has a different case study from the previous activity. 2. Students will use the case studies their table group has been allocated to guide a discussion based on 4 questions: i. What support might benefit this student? ii. What support is within the boundaries of your role? iii. What support is outside the boundaries of your role? iv. What works when providing support to a student? 3. Remind students to make notes of their discussion using the case study worksheet. 4. Remind students know we will be discussing each case study and the group's responses in the large group once they are finished.	Table group discussions guided by case studies
	5. Have each table group remind the large group of what had been noticed about this student in the previous activity and present their key points for each question to the large group. 6. Facilitate a large group discussion, adding any additional points the groups may have missed.	Sharing outcomes of table group discussions Whole group discussion

Refer

Where Do You Refer Students?



Where Do You Refer Students?



ACTIVITY

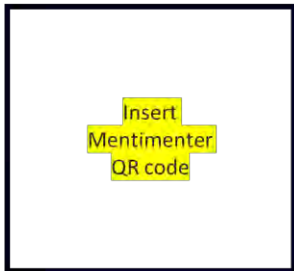
Instructions

Using Mentimeter, rank the frequency you refer students to the supports listed in your role as an RA.

- 1 = Never
- 2 = Rarely
- 3 = Occasionally
- 4 = Sometimes
- 5 = Frequently

Where do you refer students you provide support to?

Scan the QR code if you need to rejoin Mentimeter:



Code: XXXX XXXX

Topic	Key Points	Activities
Refer	1. Ask students to return to Mentimeter using their phone or laptop and answer the question. 2. Let students know they can reconnect at any time using the QR code on the screen or online at www.mentimeter.com and entering the code on the screen. 3. Remind participants their responses are anonymous.	Mentimeter

Effective Referrals



Refer



In order to effectively refer a student for support, we need to know:

- Relevant policies and procedures
- Internal referral options
- External referral options
- Where to get further information or advice
- Our limits and boundaries

Our language and our approach when we refer can influence the student's actions:

- Avoid problem saturated language
- Use solution-focused approaches
- Normalise accessing support
- Provide practical information
- Explain what a student can expect when they access the service
- Provide appropriate assistance to access support
- Speak about referral options positively

Topic	Key Points
Noticing	1. Referrals can be to services, hotlines, programs or people. They can also be to processes or policies. 2. It is important to know what is available at the university to support students and where to access information about supports available. 3. You don't have to remember all of the support services, as long as you know how to find the information when you need it or how to show someone where to find it. 4. It is useful to have external options for after-hours support, such as Lifeline or a range of helplines relevant to the situation. 5. It is important to maintain your boundaries and let the student know if the conversation, situation or problem is beyond your role. Then help them to find the right person or service.
	ANIMATION: Click to reveal the box on the right.
	6. When making a referral, it is important to normalise help-seeking and speak positively about the way accessing support can help. 7. Remind the student that support services are there because many students face challenges when they are studying.

Group Activity – Case Study

**Refer**

GROUP ACTIVITY

Read the information about the student your group has been allocated and answer the following questions:

1. Where could you refer this student?
2. What works when making a referral?
3. What doesn't work when making a referral?

Topic	Key Points	Activities
Refer	1. Allocate 1 case study to each table, making sure each table has a different case study from the previous two activities. 2. Students will use the case studies their table group has been allocated to guide a discussion based on 3 questions: i. Where could you refer this student? ii. What works when making a referral? iii. What doesn't work when making a referral? 3. Remind students to make notes of their discussion using the case study worksheet. 4. Remind students know we will be discussing each case study and the group's responses in the large group once they are finished.	Table group discussions guided by case studies
	5. Have each table group remind the large group about the current situation of this student and present their key points for each question to the large group. 6. Facilitate a large group discussion, adding any additional points the groups may have missed.	Sharing outcomes of table group discussions Whole group discussion

Reminder of Steps Covered Today



Reminder of steps covered today



Topic	Key Points
Revision of the model	1. Explain that we have just used this model to guide our discussions about the fictitious case studies to practice applying each step. 2. Remind participants of each stage of the model: 1. NOTICE ▪ Signs that a student would benefit from a conversation or support. ▪ When we notice what is happening for students, we can check in and provide support if the situation warrants it. 2. SUPPORT ▪ Provide appropriate support with empathy and compassion within the boundaries of the role of an RA. ▪ Support takes many forms, which we have talked about using case studies to guide our discussion today. 3. REFER ▪ If required, to a suitable person, policy, service or program. ▪ Not all situations require referrals, but we have talked today about what works when making a referral.

Reflection

**Reflection**

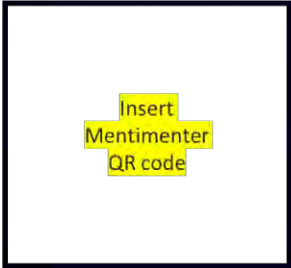
ACTIVITY

Instructions

- 1. On the first slide:**
Rank the statements
- 2. When the second slide appears:**
Tell us one thing you will do differently in your role as an RA following today's workshop.

Reflection on today's workshop

Scan the QR code if you need to rejoin Mentimeter:



Code: XXXX XXXX

Topic	Key points/Learning Outcomes	Activities
Support	1. Ask students to return to Mentimeter using their phone or laptop and answer the questions. 2. Let students know there will be two questions to answer. 3. Let students know they can reconnect at any time using the QR code on the screen or online at www.mentimeter.com and entering the code on the screen. 4. Remind participants their responses are anonymous.	Mentimeter

Note:

- Remember to move the Mentimeter slide to the second question for this section.

Next Steps



Next Steps



We want you to practice using the model we used today:



We'll follow up with you to see how you go with applying the model in your role as an RA

Topic	Key points/Learning Outcomes
Next steps	1. Briefly describe the next steps (if any).

Additional Resources

If time permits, it can be useful to provide a few examples of where to find online information, fact sheets and support for staff and RAs to be able to refer students to these, find resources, or for further reading.

Examples include, but are not limited to:

- [Digital-Mental-Health-for-Tertiary-Students-2.pdf \(emhprac.org.au\)](#)
- [Mental Health – Universities Australia](#)
- [Home | Head to Health](#)
- [Looking after your wellbeing | Head to Health](#)
- [Living well | Head to Health](#)
- [Digital mental health - Black Dog Institute](#)
- [Tools and Apps | ReachOut Australia](#)
- [Free Mental Health Fact Sheets - Black Dog Institute](#)
- [I'm a young person - In category Mental ill-health \(headspace.org.au\)](#)
- [Resources for health professionals - In category Printable fact sheets for young people and families \(headspace.org.au\)](#)
- [Beyond Blue | 24/7 Support for Anxiety, Depression and Suicide Prevention](#)
- [QLife](#)
- [First in Family Website](#)
- [International student support \(studyaustralia.gov.au\)](#)
- [International Education - Department of Education, Australian Government](#)
- [Disability Support - Higher Education Students](#)



Building Safer Communities

RA Workshop

WESTERN SYDNEY
UNIVERSITY



Steve Lee



Kim Copeland



Today's Workshop

1. Check in
2. Health, mental health and wellbeing of students
3. Why is it important to notice what is happening?
4. What are you noticing?
5. How do you provide support to students?
6. Where do you refer students?
7. Reflection
8. Next steps



ACTIVITY

Instructions

Scan the QR code

or go to:

www.menti.com

and enter the code:

XXXX XXXX

Insert Mentimeter
QR code

Code: XXXX XXXX



HEALTH

A state of complete physical, mental and social wellbeing and not merely the absence of disease or infirmity.

MENTAL HEALTH

A state of mental wellbeing that enables people to cope with the stresses of life, realise their abilities, learn well, work productively and contribute to their community.

WELLBEING

The state of being comfortable, healthy or happy encompassing quality of life and the ability to contribute to society with a sense of meaning and purpose.

- # Difficulties in the Transition from High School to University
- ## Harassment and Sexual Assault
- Being away from home
 - New ways of learning
 - Career choice between students
 - Employment issues
 - New environment
 - The need to know where to go for help
 - Sexual exposure to the
 - Research worldwide shows that of those (NSW) information previously:
 - Sexual relations
 - students who are diagnosed with mental ill
 - linked to mental health issues and
 - sexual harassment
 - health at university; support systems
 - sexual harassment have to experience sexual
 - rape relations
 - Changes in friends and friendships
 - major life events
 - work demands and unintended
 - 50% had pre-existing conditions
 - Low 90 students having experienced
 - Primary and secondary and study
 - Health and wellbeing
 - students not seeking help
 - Brackets the study and home
 - 50% reported onset of symptoms after
 - work and personal life
 - Diet and food stability
 - commencing study.
 - Academic versus personal matters
 - Balancing work and study



Notice



Support



Refer



ACTIVITY

Instructions

Using Mentimeter, tell us what you are noticing about the challenges and issues students are experiencing.

You can enter multiple responses.

List each type of support separately.

Use a single word or very brief description.

What are you noticing in your role as an RA?

Scan the QR code if you need to rejoin Mentimeter:

Insert
Mentimeter
QR code

Code: XXXX XXXX

You might consider:

- What do students struggle with?
- What are the common things you help students with?
- What are the issues students raise with you?
- What concerns do you have or do others share with you?
- Are there themes you notice in the issues students face?

Noticing – What are some of the signs someone might benefit from support?



- Asking for help
- Social withdrawal
- Talking about feeling:
 - stressed
 - sad
 - lonely
 - depressed
 - anxious
 - overwhelmed
- Changes in:
 - behaviour
 - sleep patterns
 - academic performance
 - emotions
 - appearance
- Substance abuse

If you are not sure, you can ask yourself:

1

Has the behaviour persisted for a while?

2

Is the behaviour interfering with the student's study, work and/or life?

3

Is the behaviour causing distress for the student, their peers and/or others?

4

Is the behaviour risky or could cause harm to them or others?



GROUP ACTIVITY

Read the information about the student your group has been allocated and answer the following questions:

1. What do you notice about this student that indicates they might benefit from a conversation, information or action?
2. What makes it hard to notice what is happening for a student?
3. What would help you to decide whether to act on what you have noticed?



ACTIVITY

Instructions

Using Mentimeter, tell us about the types of support you provide students.

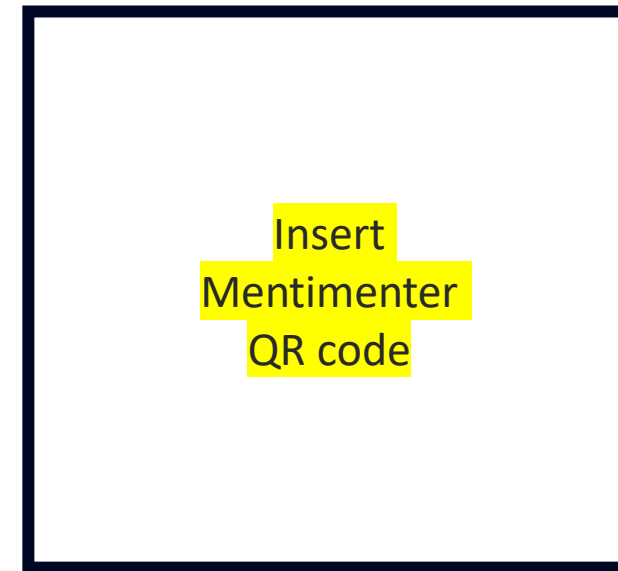
Use a single word or very brief description.

You can enter multiple responses.

List each type of support separately.

What types of support do you provide to students?

Scan the QR code if you need to rejoin Mentimeter:



Code: XXXX XXXX



- Let them know what you have noticed
- Have a conversation
- Listen
- Be non-judgemental
- Validate their feelings
- Be patient
- Ask them what they need
- Encourage self-care
- Provide information, resources, and/or support
- Be mindful of boundaries
- Educate yourself and be prepared to provide support

If appropriate to the situation:

- Offer practical support
- Explain how to access support
- Encourage professional help
- Check in later

Remember, if you are in doubt:

Seek advice

Call for help



GROUP ACTIVITY

Read the information about the student your group has been allocated and answer the following questions:

1. What support might benefit this student?
2. What support is within the boundaries of your role?
3. What support is outside of the boundaries of your role?
4. What works when providing support to a student?



ACTIVITY

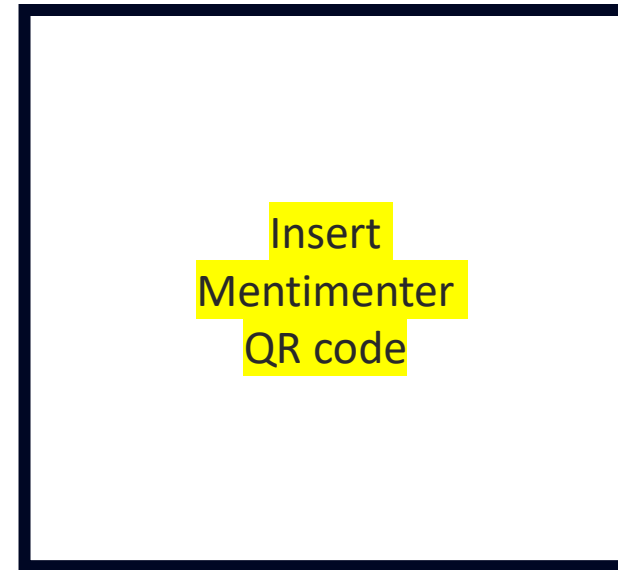
Instructions

Using Mentimeter, rank the frequency you refer students to the supports listed in your role as an RA.

- 1 = Never
- 2 = Rarely
- 3 = Occasionally
- 4 = Sometimes
- 5 = Frequently

Where do you refer students you provide support to?

Scan the QR code if you need to rejoin Mentimeter:



Code: XXXX XXXX



In order to effectively refer a student for support, we need to know:

- Relevant policies and procedures
- Internal referral options
- External referral options
- Where to get further information or advice
- Our limits and boundaries

Our language and our approach when we refer can influence the student's actions:

- Avoid problem saturated language
- Use solution-focused approaches
- Normalise accessing support
- Provide practical information
- Explain what a student can expect when they access the service
- Provide appropriate assistance to access support
- Speak about referral options positively



GROUP ACTIVITY

Read the information about the student your group has been allocated and answer the following questions:

1. Where could you refer this student?
2. What works when making a referral?
3. What doesn't work when making a referral?



Notice



Support



Refer



ACTIVITY

Instructions

1. On the first slide:

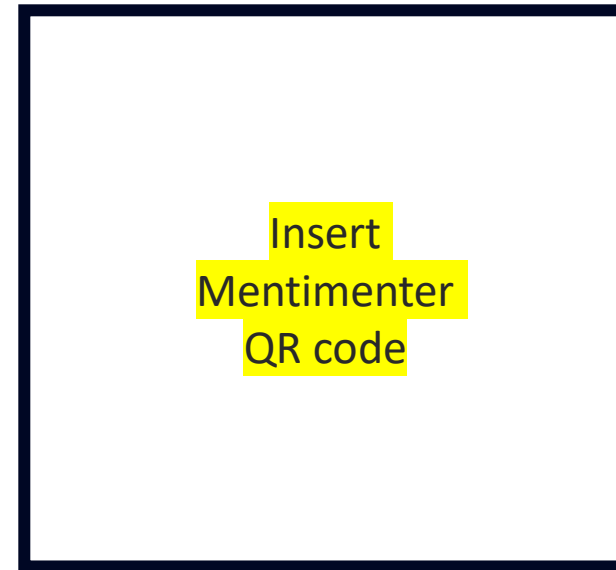
Rank the statements

2. When the second slide appears:

Tell us one thing you will
do differently in your role
as an RA following
today's workshop.

Reflection on today's workshop

Scan the QR code if you need to rejoin Mentimeter:



Code: XXXX XXXX



We want you to practice using the model we used today:

Notice



Support



Refer

We'll follow up with you to see how you go with applying the model in your role as an RA

Safer Communities RA Workshops

Mentimeter Results Summary

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Hawkesbury.....	9
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Check In

Statement	Lowest Score*	Highest Score	Hawkes-bury Average (N=6)	Campbell-town Average (N=7)	Parramatta Average (N=12)	All Campus Average
I have a good understanding of the health, mental health and wellbeing issues Australian university students face.	2	10	8	7	8.33	7.78
I feel confident that I can notice when a student would benefit from support.	5	10	7.83	5	8.5	7.11
I feel equipped to respond to student concerns or issues.	6	10	6.83	7	7.67	7.17
I feel confident providing support to a student about concerns or issues they are experiencing.	4	10	7.83	7	8	7.61
I seek advice to support a student if I am unsure about what to do.	5	10	9.33	10	9.17	9.48

*1 = Strongly Disagree, 3 = Disagree, 5 = Neutral, 8 = Agree, 10 = Strongly Agree

What are you noticing in your role as an RA?

Hawkesbury

- Loneliness: we help them by organising different group events
- Study
- Working the stoves
- Learning to cook
- Socialising
- Making friends
- Residents are struggling sometimes to maintain cleanliness in the apartment as all housemates are sometimes not in same phase
- Not happy sometimes
- I started working as an RA 2 weeks ago. I know it's not really a long time but still a lot of things I noticed like students are struggling with financial crisis, dealing with relationship problems.
- International students having a hard time transitioning to living here.
- Loneliness of missing family
- Peer pressure to go drinking
- The social gap between international students and domestic students

Campbelltown

- Stress relating to studies
- Loneliness
- Substance abuse
- Homesick
- Depressing environment for students
- Lots of different things
- Mostly residents have issues with their housemates like the way they maintain the house
- Some residents have also issues with transportation as the shuttle bus service is not proper in this campus
- Loneliness
- Study stress
- Commonly help students with lockouts and recoding access cards
- The common issues student raise are; why is the Wifi not working, Why can't I use discord
- Loneliness
- Can help by being there for them
- Issues raised are how to deal with stress
- Concerns about managing mental and physical health
- Themes related to studies, financial and social life

Parramatta

- Higher rates of suicide attempts
- Financial issues
- Relationship issues
- Higher rates of depression
- I notice that students that live on campus sometimes expect me to solve maintenance emergency's where I can not. I need maintenance men to help. And during fire alarms I need to gather more data.
- Higher self harm rates
- Higher rates of cultural stress
- Eating disorders
- Substance abuse
- Residents being reserved to approach
- Loneliness
- Resident isolation
- Shyness
- Financial Struggle for international students trying to take care of tuition fees
- Homesickness
- Loneliness
- Feeling of intimidation to approach new people of different ethnic backgrounds
- Afraid to ask for help
- Prevalence of mental health issues
- Stress with study
- Very little down time to relax
- Up late at night doing chores/tasks
- Students panicking when fire alarms are set off
- Other residents being worried about their house mates
- Welfare checks being done regularly
- Residents typically reporting as being well in checks
- Some are struggling with having enough food, going paycheck to paycheck
- Quite a lot are struggling with making friends because people do already have their groups most of the time
- Food. They rely on RA events for food and request nothing but food events
- People connect with each other easier through race.
- Being international students its nice to see someone from the same background. But its still a thin line between that and racism...?
- Self Harm
- Substance Abuse
- Stress
- Anxiety
- Abnormal behaviour indicating some underlying mental health issues
- International residents being homesick
- Several exchange students have trouble making their resumes and I have received several requests from people to give help regarding their resumes.
- I do notice that residents are more open to me about their personal problems. They are more ready to share issues, knowing that the conversation is confidential.
- Students do feel homesick, become isolated during the first few days to moving in. On the other hand we also have students who regularly socialise

What types of support do you provide to students?

Hawkesbury

- Lock out
- Laundry
- Check in
- Check in
- Laundry
- Information
- Connecting residents
- Mental health support
- Information about room type or options, etc
- Tokens
- Vacuum, etc
- Check in
- Lock out
- Events
- Emotional: checking welfare
- Mental: supporting study groups and community events
- Teaching basic things like how to use washing machine
- Helping move things
- Connecting students
- Organising events
- Helping international students adjust
- Listening to them when they need to talk
- Suggest ways or things that could help
- Teach them things like cooking, laundry, and how to use appliances in their room or apartment
- Show them around
- Showing the new residents how to use the driers, washing machines, as an RA helping them in possible way you can.
- Providing mental support and other type of support according to the situation

Campbelltown

- Welfare checks
- Peer support (physical and emotional)
- Mental support for students counselling and wellbeing services provided by university for free via email or zoom calls
- Inviting them to events
- I have done a mental health check on a resident. They had an incident during the day and their dad had to come. I would check on her every hour and check if she'd had food/water and if she was ok
- Mental support
- Household Services
- Emergency contact
- Counselling and mental health services
- Welfare checks

- 24/7 available RA phone
- University supports - study groups, mentors etc
- An RA on shift 24/7 - they can talk to whenever they want
- Mental health support

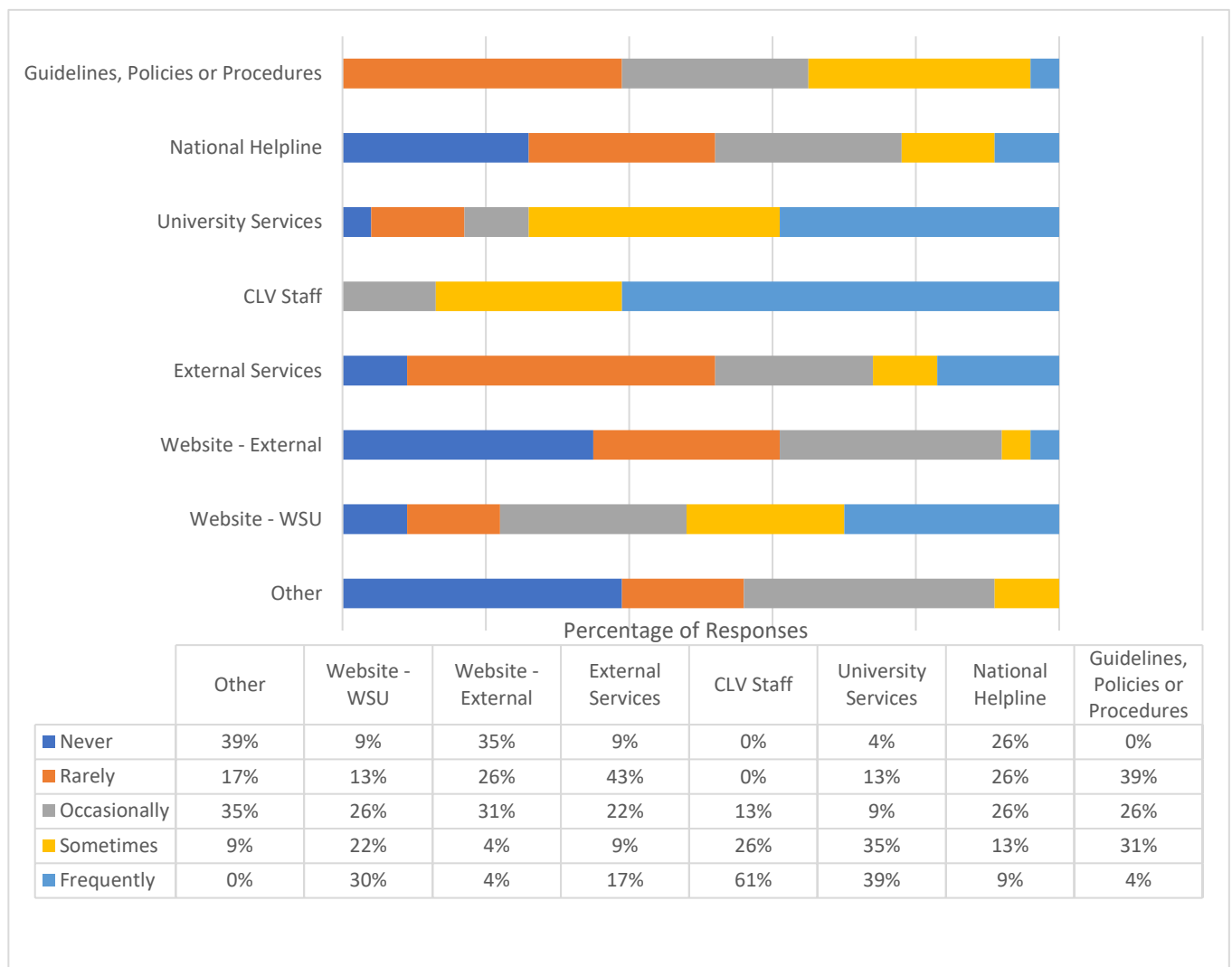
Parramatta

- Resources
- Advice
- Guidance on village procedures
- Coping strategies
- supplying welfare support brochures
- Emotional by talking and listening
- Physical support through actions like being of assistance
- Counselling services
- Mental health lines
- Centrelink
- Happy to chat, I'll sit down with residents and let them talk for a while, just listen and hear them out and offer support where I can. I'll refer to management if necessary
- Emotional support, finding them a person who is more suitable to give them support (friend speaking the same language, professional help, etc) or just company and a nice cup of tea :)
- Welfare services
- Various events to improve the social life of the residents
- Brief chats, friendly demeanour, approaching with a smile, always greeting each other while crossing paths, remembering their name so they feel like they belong here
- Provide info related to academics
- Help in finding jobs
- Educate them about resources available to them
- Their rights as students or international students specifically
- Personally invite people, who are in a bit stress, to participate in couple of events we organise so that they can let loose a little
- Connecting them to mental health experts
- Connecting them with university welfare officers
- Reporting to DM for welfare checks

Where do you refer students you provide support to?

Statement	Lowest Score*	Highest Score*	Average*
Guidelines, procedures or policies	2	4	3.04
National helpline (1800) phone number	1	5	2.55
University services	1	5	3.89
CLV Staff	3	5	4.41
External services	2	5	2.77
Website - external	1	3	2.18
Website - WSU	1	5	3.53
Other	1	3	2.12

*1 = Never, 2 = Rarely, 3 = Occasionally, 4 = Sometimes, 5 = Frequently



Reflection. Following the workshop....

Statement	Lowest Score*	Highest Score	Hawkes-bury Average (N=6)	Campbell-town Average (N=7)	Parramatta Average (N=12)	All Campus Average
I have an increased understanding of the health, mental health and wellbeing issues Australian university students face.	1	10	8.83	8.14	8.64	8.54
I feel more confident that I can notice when a student would benefit from support.	1	10	8.33	7.71	8.81	8.29
I feel better equipped to respond to student concerns or issues.	1	10	7.83	7.43	8.64	7.97
I feel more confident providing support to a student about concerns or issues they are experiencing.	1	10	8.5	7.43	8.64	8.19
I am more likely to seek advice to support a student if I am unsure about what to do.	1	10	9.17	6.71	9.09	8.32
I am likely to use the Notice, Support, Refer model in my role as an RA.	1	10	9	7.86	8.64	8.50

*1 = Strongly Disagree, 3 = Disagree, 5 = Neutral, 8 = Agree, 10 = Strongly Agree

^There was one outlier in the data who scored 1 for all statements.

What is one thing you will do differently following today's workshop?

Hawkesbury

- Listening the concerns of residents more patiently
- No prior judging
- No rush in replying or taking actions
- Be more vigilant when it comes to resident behaviour and do more research into external support
- Use a better approach when coming up to residents who need mental health support
- Become a better listener

Campbelltown

- I will ask if people are ok more often
- Be more understanding and mindful of the situation
- Referrals
- Perform welfare checks with residents more often
- The way I would provide mental health support to the residents and the way I talk to them about things
- Help the residents and people around more effectively with appropriate measures taken and decisions making skills
- I will actively support residents more than usual as I feel more confident about how to help them
- I would make sure to listen to students. And provide them with the appropriate assistance needed. I would make sure to check on them frequently. If I notice anything, I will try to acknowledge it.

Parramatta

- Refer more resources connected to the uni or otherwise, go a step beyond just listening
- Be more proactive in learning about resources available for students
- N/A
- I will improve the way to approach the residents making it easier to approach the ra's
- Get access and know more about the service providers for different kind of support and expose that to those who need it
- How to deal with residents after noticing difference in behaviour



Gender-based violence impacts individuals of all genders throughout their lives. Students identifying as female, transgender, and non-binary are more likely to experience sexual harassment and abuse, including in university settings.

The Building Safer Communities campaign promotes awareness about gender-based violence, fosters a culture of respect and safety, and provides advice on how to recognise, respond and refer when help is needed.

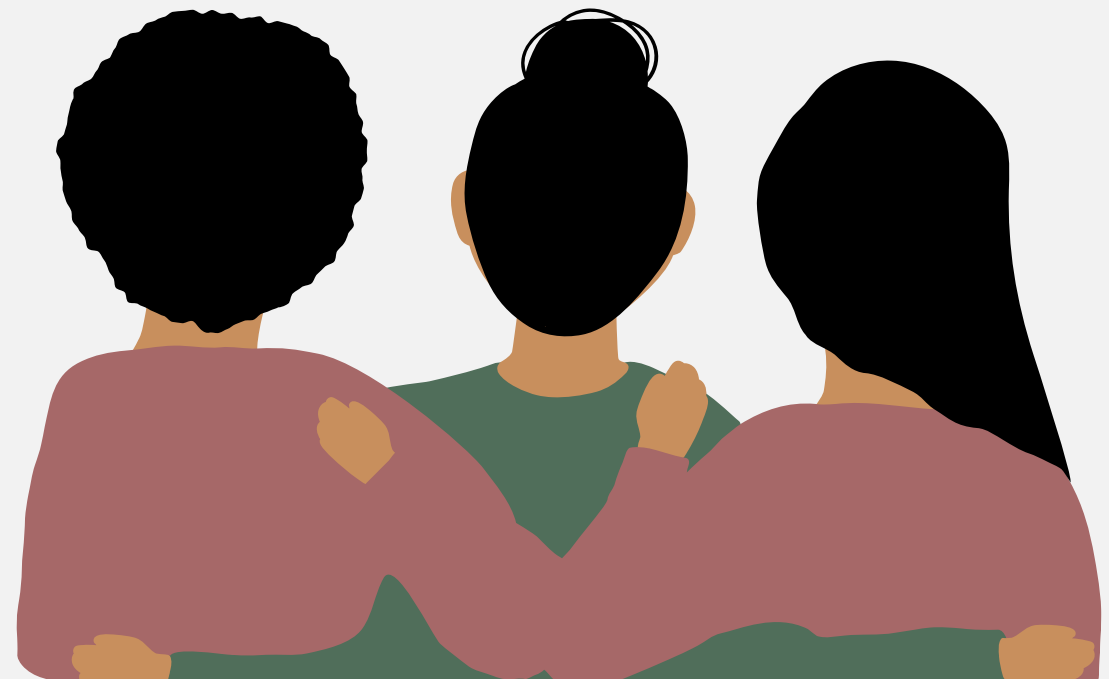


Support & Referral



recognise, respond & refer.

BUILDING SAFER COMMUNITIES



recognise

We all face challenges, and sometimes we just need someone to understand what's going on. You may notice a friend or yourself:

- Avoiding socialising or withdrawing
- Avoiding discussing personal topics
- Showing signs of anxiety, depression, or suicidal ideation
- Feeling fatigue or insomnia
- Fearing not being believed
- Feeling helpless



By taking a moment to listen and make someone feel heard, we can let them know we're here for them and that there's help available. How we respond might look like:

- Expressing compassion
- Listening without judgement
- Encouraging self-expression
- Providing support choices
- Respecting and honoring their decisions

respond

refer

Emergency Assistance
Police/Fire/Ambulance
000

Western Sydney University
Campus Safety & Security
1300 737 003

NSW Rape Crisis (24/7 support)
1800 424 017

1800 RESPECT (24/7 support)
1800 737 732

University Support Services
Mon-Fri 9.00am - 5.00pm
1300 668 370

University Complaints Resolution
(02) 9678 7900

Submit a report - this can be
anonymous



why recognise

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why respond

why refer

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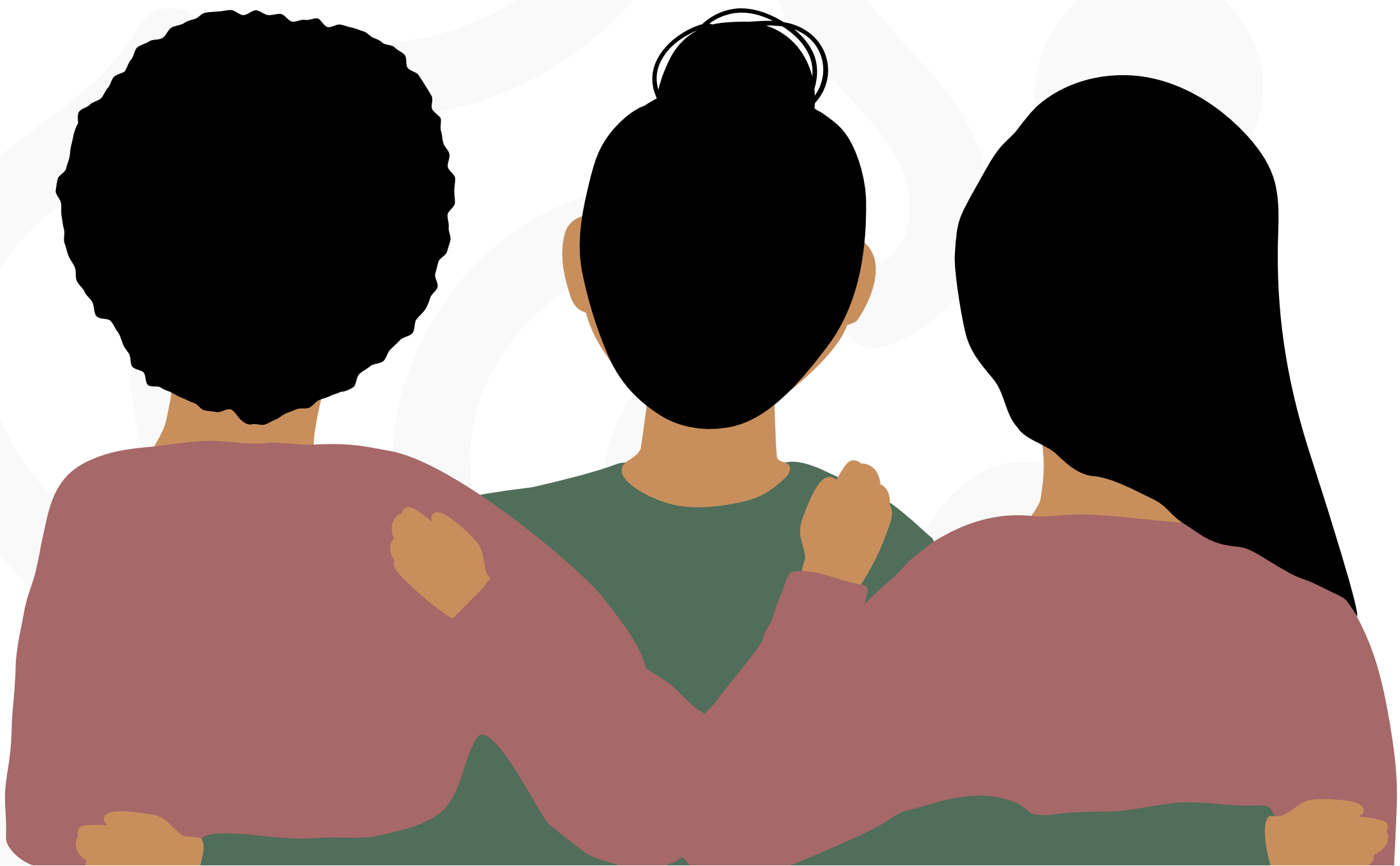
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